Foster Family Home - Corrective Action Report

Provider ID:

1-562563

Home Name:

Nora Buccat, RN

Review ID:

1-562563-8

91-231 Kaukolu Place

Reviewer:

Jackie Chamberlain

Ewa Beach

HI 96706

Begin Date:

9/10/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) Home inspection made for a 2 bed CCFFH recertification. corrective action required within 30 days

Foster Family Home

Physical Environment

[11-800-49]

49.(a)(2)

Grab bars in bath and toilet rooms used by the client, as appropriate;

Comment:

49.a.2 There are no grab bars around toilet area in the bathroom

Foster Family Home

Records

[11-800-54]

54.(c)(5)

Medication schedule checklist;

Comment:

54.(c)(5)2 medication discrepancies between pill bottle label and the medication administration record medication administration record has not been signed since 9/5/2020

Primary Care Giver

9/11/2020 19:51 PM

Page 1 of 1

CTA RN Compliance Manager:

Jackie Chamberlain RN

Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800

PCG's Name on CCFFH Certificate : NORA A. BUCCAT

CCFFH Address: 91-231 KAUKOLU PLACE, EWA BEACH, HAWAII 96706

Rule Number	Corrective Action Taken - How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy _How will you prevent each violation from happening again in the future ?
6. (d)(1)	I will comply with all applicable requirements in this chapter in order to renew my certificate /CCFFH recertification .	9/11/2020	I will make sure to check from time to time the rules and requirements and not just taking out or keeping away the toilet commode around the toilet or other devices in the client's room or toilet.
49.(a) (2)	I put back the toilet commode with side or grab bars in the toilet for my client to use as needed .	9/11/2020	I will make sure that the toilet commode with grab/side bars will stay in the toilet @ all times for my
54. (c) (5)2	-I informed the client Case Manager &		client to use, for safety and fall precautions. I posted a note in the toilet not to remove the toilet commode.
04. (b) (b)2	corrective actions done. CMS fixed the MAR and Med checklist, making sure it's the right doctor's order with the same medication bottle labeling.	9/21/20	-Will have case managers to thoroughly double check also the MAR, medicine bottles, and doctors orders are all the same and
	-I signed my MAR, and made sure I check and sign daily or after each medication administration.	9/11/20	no discrepancies during their monthly visitsI will make sure to check and sign my MAR right away post medication administration.

All Items that were fixed are attached to this CAP
PCG's Signature :

Date: 9/26/20

CTA has reviewed all corrected items